

# NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

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UNNOTICED FRACTURES IN CHILDREN.—Dr. F. H. Cotton and Dr. R. H. Vose, of Boston, have written a paper in the *Boston Medical Journal* on fractures in children which may readily be overlooked because of the comparative absence of symptoms. There is apt to be little or no displacement in these cases and slight pain.

There is nearly always some difference in the use of the limb on the two sides or the motion of the injured one is limited. With a fractured clavicle, for instance, if the child is asked to raise both arms, he lifts one hardly more than half as high as the other, though it does not seem to pain him and he will permit it to be lifted without difficulty.

In small children when there is a history of fall or other violence, and especially when the arm or shoulder is involved, the only safe way seems to be to assume a fracture as probable until every inch of bone has been carefully gone over. On pressure a localized tenderness, slight but definite, may reveal the presence of a fracture.

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THE MENTAL STATE OF HYSTERICALS.—A book with this title, a translation from the French of Pierre Janet, M.D., by Caroline Rollin Corson, is reviewed in the *Boston Medical Journal*. It is said that in these works Janet demonstrated more fully and completely than had before been done that the various hysterical symptoms were due to abnormalities of the mental state, that sensations actually reached the brain, but that they were in part ignored by the patient owing to a limitation of the field of consciousness. In this way he explained many anomalies and peculiarities of the hysterical phenomena which had previously seemed contradictory and had often caused the hysterical patient to be regarded as a barefaced simulator.

Since the publication of these works Janet's theories have been confirmed by the observations of many independent investigators both in Europe and America.

Nurses are perhaps especially prone to underestimate the sufferings of hysterical patients and to forget that they are very real to the sufferer. They should bear in mind that hysteria is the manifestation of an abnormal condition, and it is to be dealt with by proper treatment, not that with a covert sneer and the conviction that the patient could help it if she chose, which, as it arises from causes outside her control, is manifestly impossible.

It is true that the will-power of the patient may be exerted so as to help in her relief, if not in her cure, and the nurse may properly endeavor to call this into action; but she must never lose sight of the fact that she is dealing with a diseased condition of nerves and mind as real as if the person were afflicted with typhoid-fever.

**THE WORSTED TRUSS.**—J. T. Hubbard says in *The Annals of Surgery*: "No truss for the retention and cure of hernia in children is any better than a skein of worsted. As a rule, a whole skein is too bulky and should be halved. It is applied by placing the loop over the external abdominal ring, passing the skein across the abdomen to the left, horizontally across the back, thence forward over the right loin and groin to the ring, through the loop already there, over the internal surface of the thigh and perineum, upward over the buttock to meet the horizontal reach across the back, to which it is tied after the hernia has been replaced and the truss tightened to retain it.

"This truss irritates the skin only when soiled, can be washed repeatedly until its softness and elasticity are gone, and is renewable at very moderate cost.

"As in the case of all truss treatment in hernias, the watchfulness of the mother is as much a factor in the result as anything else. In about two-thirds of the cases so treated cure or improvement has resulted. In the others operation was efficacious."

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**ARTIFICIAL MILK.**—Dr. Louis Kolipinski in a paper in the *Medical News* says that an artificial milk, presumably for the use of adults, should approximately represent all the component parts of real milk, and should be cheap, readily prepared, and palatable. He gives the following formula:

Extract of malt (syrupy), one tablespoonful; olive oil, one tablespoonful; roasted flour, two tablespoonfuls; one broken raw egg. Beat in a bowl with a spoon or egg-beater for three or four minutes. Add by degrees while stirring a tumblerful of pure, cold water; season with table salt. To be taken one or two hours after meals. In hot weather add crushed ice, or prepare the whole in a milk-shaker.

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**PREVENTION OF MAMMARY ABSCESS.**—The New York *Medical Journal* quotes from one of its foreign exchanges a paragraph on suppuration of the breast, in which it says that this painful condition may in many cases be prevented by careful asepsis thoroughly carried out. Müry, of Basel, for about ten years past has had good results from keeping the nipples moistened with a four per cent. solution of boric acid and having the nipples and the child's mouth washed with this solution before each nursing. By this simple treatment the occurrence of breast abscesses has been reduced from 1.45 to 0.22 per cent. of the cases of confinement.

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**DISINFECTION.**—Dr. William M. Welch in a letter to the Philadelphia *Medical Journal*, in reply to a letter asking for the best method to disinfect rooms after small-pox, says:

"Every article in the room of no great value should be burned. Articles which will not be injured by water can be disinfected safely and cheaply by immersing them in boiling water for thirty minutes and then subjecting them to the usual processes of the laundry. If this cannot be done at once, the articles should be immersed for four hours in a reliable disinfectant, as mercuric chloride 1 to 2000, or carbolic acid 1 to 50, and subsequently boiled. For the disinfection of woollen clothing, carpets, bedding, etc., there is nothing equal to steam under pressure. All pathogenic germs will certainly perish if exposed to a temperature of 230° to 250° F. When this process cannot be carried out for want of proper facilities the articles named with the exception of the carpet, which may remain on the floor, should be hung up in the room and subjected to the influence of

formaldehyde. The formalin may be diluted with two parts of water and used in a large atomizer such as is used for spraying garden plants. Take one pint of formalin to every one thousand cubic feet of air-space. The room should be as tightly sealed as possible and left closed for twelve hours.

"This method was adopted by the Philadelphia Board of Health and proved to be efficacious by means of culture-tests. When this process is finished and the room opened and ventilated, all surfaces and furniture should be washed with a disinfecting solution; the floor and woodwork thoroughly scrubbed with soap and water; the wall-paper moistened with carbolic acid solution, scraped off, and burned. The walls may be repapered, painted, or whitewashed."

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HISTORY OF THE CLINICAL THERMOMETER.—*The Journal of the American Medical Association* says that Currie, of Edinburgh, employed a thermometer in the treatment of typhoid-fever patients with the cold douche as early as 1797. He was ridiculed by his German contemporaries as an instance of medical decay in English medicine. The first clinical application of the thermometer was made by Sanctorius, of Padua. He invented a thermometer open at the end, which, after being held by the patient, was plunged into cold water. Boerhave taught the importance of the thermometer. De Haen—1704 to 1776—must be given the honor of introducing the thermometer into current use at the bedside. It was not until 1850 to 1870 that it came into general use, mostly through the studies of Traube and Wunderlich on temperature in disease.

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VALUE OF DEEP INSPIRATIONS.—*The Philadelphia Medical Journal* quotes from a foreign exchange as follows: "Hauptmann describes his trip from Hock to Harwich and his success in combating nausea and vomiting by deep inspirations. He also calls attention to the fact that if in bleeding from the nose the patient takes deep inspirations through the nose and expires vigorously through the mouth the bleeding will often stop. This method is also of value in hic-coughing and in various forms of nausea."

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DRUGS IN TYPHOID-FEVER.—It is said that the Johns Hopkins Hospital uses no drugs in typhoid-fever, and has a larger percentage of cures than any other hospital in the country.

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It is reported that two women have passed their state examination and hence are regular practising physicians of Germany. These are the first women to receive this honor, hence the event is of some interest. These two Berlin women, graduates of Halle University, have fulfilled all the legal requirements for a physician, and have studied the entire course in Germany. German women who have studied medicine have previously ranked as "heilkünstler," not as regular physicians.—*Albany Medical Annals*.

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IN a life of Pasteur, published in Paris, attention is called to the fact that the man who was destined to revolutionize chemistry came in fourteenth in the list of twenty-two candidates at his high school in Dijon, and was marked "weak" in chemistry. His researches in regard to the disease of silkworms are said to have been the means of saving France a sum equal to that paid to Germany as the price of peace. He made no attempt to obtain a legitimate profit from the commercial application of his labors.—*American Medicine*.